SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



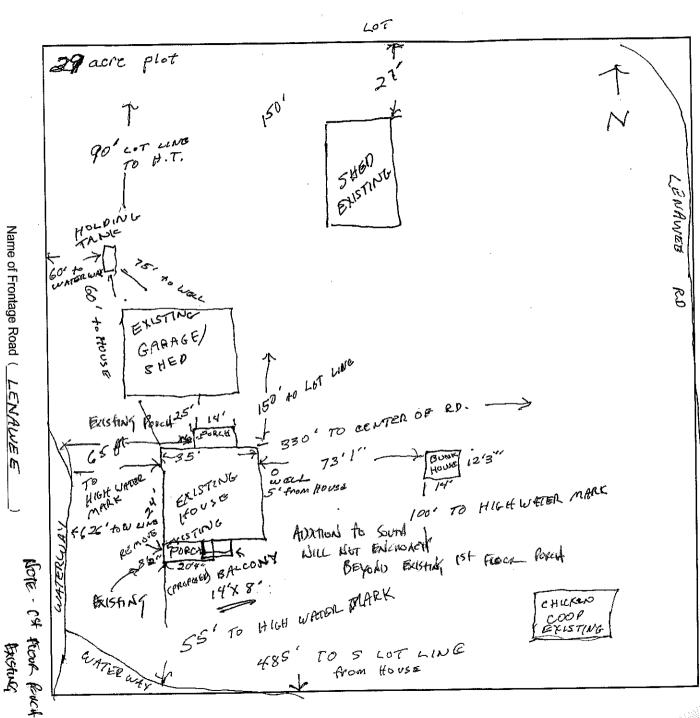
INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. Bayfield Co., Zoning Dept. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.

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205 8/9/11	unt Pai	Zoning District_	ما	Application No.	
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-3	Q.	***			

SEP 12.7011	55" to alou to ackss 3 Withhally
Date of Approval	
	DEDING AMOUNT & WHILLIAM PUM SIGNED TO
	Condition
Variance (B.O.A.) #	Mitigation Plan Required: Yes ᢂ No □
The South Abria ACO	The second
Ortholy or sould when he casteroous	Onspection Record Reputation was such while a died of
	Reason for Denial:
Permit Denied (Date)	Date 9 13 11 Permit Number 11 - 83
29 5 to 1 Date 1947	Permit Issued: State Sanitary Number
(If you recently purchased the property PLEASE COMPLETE REVERSE SIDE Attach a Copy of Recorded Deed)	* See Notice on Back APPLICANT PLEASE CC
AWEE RD. HERBIER, WI SHAMITACH Copy of Tax Statement or	Address to send permit P.O. BOX 91, 84345 LENA
- Julian rubbe 8-4-11	Owner or Authorized Agent (Signature)
relying on this information I (we) am (are) providing in or with this application. I (we) to the above described property at any reasonable time for the purpose of inspection.	to issue a permit. I (we) further accept liability which may be a result of Bayfield County consent to county officials charged with administering county ordinances to have access
TION WITHOUT A PERMIT WILL RESULT IN <u>PENALTIES</u> by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I we) am (are) providing and that it will be reliced upon by Bayfield County in determining whether	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether
	☐ Residential Other (explain)
☐ External Improvements to Principal Building (explain)	☐ Residential Accessory Building Addition (explain)
Special/Conditional Use (explain)	レケー
☐ Commercial Other (explain)	ge
☐ Commercial Accessory Building Addition (explain)	☐ * Residence w/attached garage (# of bedrooms)
☐ Commercial Accessory Building (explain)	
☐ Commercial Principal Building Addition (explain)	m i
☐ Commercial Principal Building	Residence sq. ft
Mobile Home (manufactured date)	* Residence or Principal Structure (# of bedrooms)
Basement: Yes No X Number of Stories City Sanitary: New Existing Privy City 75500	Addition Existing Square Footage
line: greater than 75' 🔲 75	ls your structure in a Shoreland Zone? Yes 🔀 No 🗍 I f yes.
Written Authorization Attached: Yes 🗍 No 🗍	Telephone 7/5 309-0269 (Home) 7/5 392-6/7/(Work)
Authorized Agent(Phone)	HERBSTER, WI SY844
Plumber	Address of Property 86345 LENAUSE R.D.
Contractor Birr Truction (Phone) 7/5 774 3876	Property Owner JOE AGOSTINE, SUSAN LEIGH
014-2-50-07-08-4-01-000-30000	Volume 946 Page 901 of Deeds Parcel I.D. 04-0
CSM# Acreage 30	Gov't LotLotBlockSubdivision
SE SPECIAL USE BO.A. OTHER SE IS SO NESE SON OF TO ROUSE HOD SE IS SON North, Range West. Town of CLOUER	LAND USE A SANITARY PRIVY CONDITIONAL USE Use Tax Statement for Legal Description 1/4 of Section Section South Condition Section South Condition Section Section South Condition Section Sec

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Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N)

- Ŋ Show the location, size and dimensions of the structure
- လ Show the location, size and dimensions of attached deck(s), porch(s) or garage
- 4 Show the location of the well, holding tank, septic tank and drain field.

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

- Ġ Show the location of any lake, river, stream or pond if applicable
- 6 Show the location of other existing structures
- Show the location of any wetlands or slopes over 20 percent.
- Show dimensions in feet on the following:
- Building to all lot lines
- centerline of road
- ည် Building to lake, river, stream or pond
- Holding tank to closest lot line
- Φ Holding tank to building
- Holding tank ರ <u>₩</u>

- closest lot line
- Holding tank to lake, river, stream or pond

- Privy to building
- Privy to lake, river, stream or pond
- Septic Tank, and Drain field to closest lot line
- Tank and Drain field to building
- ∄ Septic Tank and Drain field to well
- Septic Tank, and Drain field to lake, river, stream or pond
- ₽ Well to building

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked